

POSITION	ID NO.	DATE
CLASSIFIER		1/28/98
EXAMINER	65373	2/26/98
TYPIST	/	/
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

### INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	4-1-98
2	7-16-98
3	✓
4	✓
5	✓
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Claim	Date
Final	
Original	
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**SYMBOLS**  
 ✓ ..... Rejected  
 □ ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected